| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 | | | | | | | | Application or Docket Number | | | | | |
|--|--|---|---|-----------------------------------|---------------------------|----------------------------------|------------------------|------------------------------|----|---------------------|----------------------------|--|--|
| | | CLAIMS A | | (Column 1) (Column 2) | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
| U.S | . NATIONAL S | STAGE FEES | · . | | | · | RATE | FEE | | RATE | FEE | | |
| BASIC FEE | | | | | | | BASIC FEE | | OR | BASIC FEE | 300 | | |
| EXAMINATION FEE | | | | | | | EXAM. FEE | | 1 | EXAM. FEE | 200 | | |
| SEA | RCH FEE | | | | | | SEARCH FEE | | 1 | SEARCH FEE | 40 | | |
| FEE | FOR EXTRA S | SPEC. PGS. | min | minus 100 = | | · / 50 = | X \$ 125 = | | 1 | X \$ 250 = | | | |
| тот | AL CHARGEAE | BLE CLAIMS | 20 mi | inus 20 = | * | | X \$ 25 = | | OR | X \$ 50 = | | | |
| INDEPENDENT CLAIMS | | | 2 m | 2 minus 3 = , | | | X \$ 100 = | | OR | X \$ 200 = | | | |
| MUL | TIPLE DEPEN | DENT CLAIM PRE | ESENT | | L | | + \$ 180 = | 1 | OR | + \$ 360 = | | | |
| * If | the difference | e in column 1 is l | less than zero | o, enter "(| 0" in co | olumn 2 | TOTAL | | OR | TOTAL | 900 | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2 CLAIMS HIGHEST | | | | | | ··· (Column 3) | SMALL E | | OR | OTHER | NTITY | | |
| ENT A | | REMAINING AFTER AMENDMENT | | NUMI PREVIO PAID | IBER OUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| AMENDMENT | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | | | |
| AME | Independent | * | Minus | *** | ···· | = | X \$ 100 = | | OR | X \$ 200 = | | | |
| | FIRST PRES | SENTATION OF M | IULTIPLE DEP | 'ENDENT (| CLAIM | | + \$ 180 = | | OR | + \$ 360 = | | | |
| тот | | | | | | | | | OR | TOTAL ADDIT. FFF | | | |
| | | (Column 1) | | (Colun | mn 2) | (Column 3) | | | | | | | |
| NTB | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | IEST IBER OUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| DME | Total | * | Minus | ** | | = | X \$ 25 ≈ | | OR | X \$ 50 = | | | |
| AMENDMENT | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | | | |
| | FIRST PRES | SENTATION OF M | IULTIPLE DEP | ENDENT (| CLAIM | | + \$ 180 = | | OR | + \$ 360 = | : | | |
| | | | PART - THE | | | • | TOTAL ADDIT. | | OR | TOTAL ADDIT. | | | |
| ** | If the "Highest Nu If the "Highest Nu | umn 1 is less than the umber Previously Pai umber Previously Paid mber Previously Paid | id For" IN THIS SI id For" IN THIS SI | SPACE is less SPACE is less | s than '20 s than '3', | 0', enter "20". ', enter "3". | in the appropriate box | x in column 1 | 1. | · · | | | |